

**MISSOURI DEPARTMENT OF TRANSPORTATION
APPROVED PRODUCTS LIST**

PRODUCT EVALUATION REQUEST FORM - SIGNAL AND LIGHTING EQUIPMENT

PRODUCT INFORMATION:

Type of Product: _____

Manufacturer: _____

Model Number: _____

Description of Product: _____

Does This Product Comply With (Please Explain Any No Answers):

(Spec. Name/Number)

MoDOT specifications? YES / NO _____

Other applicable specifications (NEMA, ITE, etc.)? YES / NO _____

Comments: _____

What is the approximate FOB unit cost of the product? _____

Can a sample be provided at no cost for testing? _____

DOCUMENTATION REQUIRED:

1. Product Specification Sheets
2. Material Safety Data Sheets (if applicable)
3. Any Documentation Required by MoDOT Standard Specifications
4. Any Available Test Data

RETURN TO:
Missouri Department of Transportation
Traffic Division
P. O. Box 270
Jefferson City, MO 65102

Submitted By: _____ Date: _____

Company: _____

Address: _____

Phone: _____ FAX: _____